# THE MYSORE SILICOSIS RULES. 20

1. (*a*) These rules shall be called the Mysore Silicosis Rules.

(*b*) They shall apply to all industries specified in Schedule "A" of these rules. The Government may from time to time add to or vary the Schedule.

(*c*) They shall come into force on such date as the Government may, by notification in the official Gazette, appoint.

2. In these rules, unless there is anything repugnant in the subject or context,—

(*a*) "The Act" means the Mysore Workmen's Compensation Act, No. XIV of 1928, as amended by Act III of 1936.

(*b*) "Commissioner" means the Commissioner for Workmen's Compensation appointed under the Act.

(*c*) "Initial Examination" means examination prescribed under Rule 9 (*a*) of the rules.

(*d*) "Periodical Examination" means examination prescribed under Rule 9 (*d*) of these rules.

(*e*) "Examiner" means registered medical practitioner whose name appears in the list published by Government in the official Gazette as prescribed in Rule (5) of these rules.

(*f*) "Mining" as specified in Schedule "A" of these rules shall be construed as a reference to underground work or employment beneath the surface; to work or employment upon or about rock crushers in a rock crushing station and to work or employment in a sample-crushing room or assay office or on any tailings dump.

3. For the purposes of these rules, Silicosis shall mean Silicosis of the Lungs—

4. A person shall, for the purposes of these rules, be deemed to have or to have had Silicosis.—

(*a*) In the *Ante-primary stage*, when it is found on medical and radiological examination that the earliest detectable specific physical signs of Silicosis are or have been present, whether or not capacity for work is or has been impaired by such Silicosis.

(*b*) In the *Primary stage*, when it is found on medical and radiological examination that definite and specific physical signs of Silicosis are or have been present

and that capacity for work is or has been impaired by that disease though not seriously and permanently.

(*c*) In the *Secondary stage*, when it is found on medical and radiological examination that definite and specific physical signs of Silicosis are or have been present and that capacity for work is or has been seriously and permanently impaired by that disease.

(*d*) Silicosis with active Tuberculosis is equivalent to the Secondary stage.

5. (*a*) Every workman who desires the grant of compensation under these rules, shall apply to the Commissioner in whose jurisdiction he resides in Form "A" in duplicate.

(*b*) Application for compensation by dependants shall be made in Form "B" and shall be transmitted in duplicate to the Commissioner.

6. *Medical Examination.*—The Government shall under these rules publish, from time to time, in the official Gazette the names of Registered Medical Practitioners who are empowered to carry out examinations and issue certificates.

7. Government may also appoint Medical Officers in service as *ex-officio* examiners for the purposes of examination and issue of certificates.

8. (*a*) Government shall establish a Medical Bureau consisting of three or more Medical Practitioners or Officers with special knowledge of the diseases of the lungs and respiratory organs; and the Commissioner may, in cases of doubt, or shall, in cases where the employer or the workman is dissatisfied with the certificate granted under these rules, refer the case to the Bureau.

(*b*) In all such cases the applicant shall be X-rayed and clinically examined. The findings of the Bureau shall be final.

9. (*a*) Any applicant desiring to work in any of the industries specified in Schedule "A", after these rules have come into force, shall submit himself to a medical examination by an examiner before whom he shall be caused to appear by the employer.

(*b*) The examiner shall make such examination (including stethoscope examination) of the applicant as will enable him to fill in correctly the initial certificate in Form "C" that he is free from any disease of the lungs

22

and respiratory organs and is, in other respects, physically fit for the work for which a certificate is sought.

(*c*) Such certificate shall be transmitted to the applicant and shall be valid for a period not exceeding five years.

(*d*) After the initial examination, every workman shall be brought before an examiner by the employer for medical examination at intervals of not more than five years over a period not exceeding ten years, and thereafter at two yearly intervals.

(*e*) After every examination subsequent to the initial examination, a certificate in Form "D" stating that the workman is not suffering from Silicosis or a certificate in Form "D (*a*)" stating that the workman is suffering from Silicosis and in what stage, shall be issued and it shall be the duty of the employer to inform the workman of the contents thereof.

10. (*a*) Every workman who is already in service at the time of these rules coming into force, if he desires to become eligible for the benefits under these rules, shall be duly medically examined by an examiner before whom he will be caused to appear by the employer and if found suffering from Silicosis as defined in Rule (4), he shall be entitled to compensation as provided for in the Act.

(*b*) If it is found not possible for such workman to be present for initial examination and if he is not examined on the day he presents himself, his name shall be entered in a register maintained for such a purpose and he shall be deemed to have complied with the rules, provided that he reports himself for examination without delay, on being notified subsequently by the employer, of a date and hour on which the examination will be carried out. Failure on the part of the workman thus notified to present himself for examination without sufficient cause, shall render him ineligible for compensation and shall release the employer from all obligation under these rules, should the workman at any other date present himself for examination and be found to be suffering from Silicosis.

11. (*a*) Wherever the Commissioner considers it necessary to be satisfied by post mortem examination whether a deceased workman had Silicosis and having obtained the previous consent of the legal representatives of the

23

deceased, to the performance of such post mortem examination, he may request any Government medical officer, to conduct such an examination and send him a copy of Form "E" to be filled in by him. A medical examiner nominated by the employer shall be given an opportunity to be present at such post mortem examination and shall either agree or disagree with the findings of the Government medical officer. In the event of disagreement, the report on the case with the lungs shall be referred to the Medical Bureau by the Commissioner for their opinion.

(*b*) The medical officer so requested by the Commissioner shall, without avoidable delay, make the necessary examination and forward his report to the Commissioner in Form "E" and if Silicosis has been found to be present in the lungs of the deceased, such lungs shall accompany the report.

12. When once a workman has accepted compensation, he is prohibited from working again as such; but he is not obliged to accept compensation and give up his occupation as such.

13. If a workman continues to work in any of the industries specified in Schednle "A" for a longer period than three months after he had been certified to be suffering from Silicosis, he is not entitled to a greater amount of compensation than that to which he was entitled when first certified. But this loss of benefit does not extend to his dependants.

SCHEDULE "A." 24

**Industries involving exposure to the risk of Silicosis.**

1. Mining—Gold
2. Porcelain and Pottery Industries.
3. Cement Industry.
4. Glass Industry.
5. China Clay and Talc Industries.
6. Sandstone Industry.
7. Quarrying or Crushing or Cutting of Stones.
8. Manufacture of Bricks and Tiles.
9. Foundries and Metal Works.

FORM A.

**The Mysore Silicosis Rules.**

APPLICATION FOR PAYMENT OF COMPENSATION.

I, the undermentioned workman, hereby apply, under the Mysore Silicosis Rules, for compensation for Silicosis contracted in the course of my employment.

1. Name in full.....
2. Address in full.....
3. Names and addresses and relationship of dependants.
4. Name of the employer under whom the workman worked last with record of service.
5. Particulars of earnings.....
6. Particulars of claim.....

I hereby declare that what is stated abcve is correct.

*Signature of the applicant*

To

The Commissioner for Workmen's Compensation,

.....District,

.....

FORM B.

**The Mysore Silicosis Rules.**

APPLICATION FOR COMPENSATION BY A DEPENDANT.

I or We, the dependant or dependants of the deceased workman named.....an employee in the.....(name of the concern or firm) apply for compensation for Silicosis contracted by the workman n the course of his employment and as a result of which he died.

1. Name (s) of dependants in full.
2. Address.
3. Age.

4. Relationship to the deceased workman.
5. Occupation.
6. Particulars of earnings.
7. Particulars of claim.
8. Name of the deceased workman in full with name of last employer and record of service thereunder.
9. Date of his death.
10. Cause of his death (Post mortem certificate to be attached).

I hereby declare that I am/We are the..... .....
.....of the late.....
and that the statements contained in the above application form are true and correct.

*Signature of the applicants.*

FORM C.

**The Mysore Silicosis Rules.**

INITIAL CERTIFICATE.

(Issued without alteration.)

Expires.....(Name of concern or firm) .....
Name in full.....
Address.....

This is to certify that the abovenamed applicant on the.....
..... ...day of.....19 underwent the examination prescribed by Rule 9 (*a*) of the Mysore Silicosis Rules of 19 and was then free from any disease of the lungs and respiratory organs and was in other respects physically fit for work in industries specified in Schedule 'A'.

*Signature or left thumb impression of applicant.*

Marks of identification :—
(1)
(2)

*Place*.....

*Examiner.*

*Date*.....

This certificate is to be kept clean and must be produced at the next medical examination.

This certificate expires on.....and will be of no effect after that date.

FORM D. 26

**The Mysore Silicosis Rules.**

PERIODICAL CERTIFICATE.

(Issued without alteration.)

Expires on.....

Name in full.....

Address.....

This is to certify that the above named workman on the..... .....day of..... .....19 underwent medical examination prescribed by Rule 9 (*d*) of the Mysore Silicosis Rules and that he was not then suffering from Silicosis.

*Signature or left thumb impression of the workman.*

Marks of identification :—

(1)

(2)

*Place*.....

*Date*.....

*Signature of the Examiner.*

This certificate is to be kept clean and must be produced at the next medical examination.

This certificate expires on the.....and will be of no effect after that date.

FORM D (*a*).

**The Mysore Silicosis Rules.**

PERIODICAL CERTIFICATE.

(Issued without alteration.)

Expires on.....

Name in full.....

Address.....

This is to certify that the abovenamed workman on the..... .....day of .....19 underwent medical examination prescribed by Rule 9 (*d*) of the Mysore Silicosis Rules and that he was then suffering from Silicosis. (State stage.)

*Signature or left thumb impression of the workman.*

Marks of identification :—

(1)

(2)

*Place*.....

*Date*.....

*Signature of the Examiner.*

This certificate is to be kept clean and must be produced at the next medical examination.

This certificate expires on the.....and will be of no effect after that date.

FORM E. 27

**The Mysore Silicosis Rules.**

REPORT ON POST MORTEM EXAMINATION.

I have this day at..... .....made a post mortem examination on a body.

Name.....

Address.....

Designation.....

and as a result of my examination I find that (here state what diseases were found to be present)

and I certify that the cause of death was.....

.....

and the deceased was (not) at the time of his death suffering from Silicosis or that Silicosis was (not) present as a contributing or predisposing factor or cause of his death or that Silicosis was a contributing but not a predisposing cause of his death or that Silicosis was a predisposing but not a contributing cause of his death. (If Silicosis were present as a contributing or a predisposing cause of death, state the condition found in the organs stated below and comply with the provisions of Rule 11 printed below.)

Hilar Glands

Pleura { (Right) / (Left)

Lungs { (Right) / (Left)

Any abnormalities in other organs.

*Address*.....

*Date*..... *Medical Practitioner.*

*N.B.*--1. Strike out inapplicable clauses and attest.

11. (*a*) Whenever the Commissioner considers it necessary to be satisfied by post mortem examination whether a deceased workman had Silicosis and having obtained the previous consent of the legal representative of the deceased, to the performance of such post mortem examination, he may request any Government medical officer to conduct such an examination and send him a copy of Form "E" to be filled in by him. A medical examiner nominated by the employer shall be given an opportunity to be present at such post mortem examination and shall either agree or disagree with the findings of the Government medical officer. In the event of disagreement, the report on the case with the lungs shall be referred to the Medical Bureau by the Commissioner for their opinion.

(*b*) The medical officer so requested by the Commissioner shall, without avoidable delay, make the necessary examination and forward his report to the Commissioner in Form "E" and if Silicosis has been found to be present in the lungs of the deceased, such lungs shall accompany the report.

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## NOTIFICATION.

*No. D.* 3471—*Pat.* 1-39-3, *dated Bangalore, the* 17*th January* 1940.

The following draft rules under the Mysore Patents and Designs Act III of 1925 as amended by Act XV of 1939 are published for the information of the public under Section 73 (2) of the said Act of 1925. Suggestions, if any, for additions or alterations to the proposed rules may be communicated to the Secretary to Government, Development Department, within one month from the date of this notification.

By Order,

C. E. NORONHA,

*Secretary to Government,*

*Development Department.*